Effective tober 1, 2001 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE [SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE FOR out of NUMBER FILLD NUMBER ELTER 37.43 ORIGASIC FEE 740.00 **TOTAL CHARGEABLE CLAIMS** minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X42= X84 =OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT AMENDMENT TIONAL RATE **AFTER** RATE PREVIOUSLY TIONAL **EXTRA** AMENDMENT PAID FOR **FEE** FEE 1) Total Minus X\$ 9= X\$18=OR Minus Independent X42 =X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDIa ADDI-REMAINING NUMBER PRESENT AMENDMENT TIONAL RATE **AFTER PREVIOUSLY** RATE TIONAL **EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus *** X42 =X84 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL. TOTAL OR' ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST Ö ADDI-REMAINING ADDI-NUMBER PRESENT AMENDMENT AFTER. **PREVIOUSLY** RATE TIONAL RATE TIONAL **EXTRA AMENDMENT** PAID FOR FEE FEE Total • Minus X\$ 9= X\$18= OR Independent Minus X42 =X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20." ADDIT. FEE OR ADDIT. F. The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter 3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. TOTAL TOTAL

PATENT APPLICATION FEE DETERMINATION RECORD

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Application or Docket Number

PATENT APPLICATION FEE DETERMINATION FEE ORD Fflective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMAU	DELY.	OTHER THAN OR SMALL ENTITY		
FO	R	NUMBE	R FILED	NUMBER E	XTRA	RATE	FEE		RATE	FEE
BA	SIC FEE			······································		4,4	345.00	OR		690.00
то	TAL CLAIMS	18	minus 20	0= *		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS 2	minus 3	· - · /		X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT						+130=	, ,	OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	640
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL E	NTITY	OR	OTHER SMALL	ENTITY
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. \frac{7}{2}	Minus	20	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	3	=/	X39=/		OR	X78=	
_	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT CLAIM		+130=		OR	+260=	
						TOTAL ADDIT. FEE		ا را	TOTAL	
	(Column 1) (Column 2) (Column 3)] •	ADDIT. FEE	
AMENDMENT B	b	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	DO	=	X\$ 9=		OR	X\$18=	
AMEN	Independent	. 3	Minus	PENDENT CLAIM	=	X39=		OR	X78=	
H	FIRST PRESE	NIATION OF N	OLTIPLE DEP	PENDENT CLAIM		+130=		OR	+260=	
					•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)	ADDITITEE		_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MO	Total	•	Minus	••	=	X\$ 9=		OR	X\$18=	1
AMENDMENT	Independent	•	Minus	•••	=	X39=		OR	X78=	
L	FIRST PRESE	ENTATION OF M	AULTIPLE DEI	PENDENT CLAIM		.120		1	+260=	
	If the entry in colu	umn 1 is less than	the entry in colu	ımn 2, write "0" in co	olumn 3.	+130= TOTAL		OR	TOTA	
1	If the "Highest No	umber Previously	Paid For" IN THI Paid For" IN TH	S SPACE is less the IS SPACE is less the Independent) is the	an 20, enter "20." an 3. enter "3."	ADDIT. FEE		OR ox in co	ADDIT. FE	